**INFORMATIONAL LETTER NO.1116** 

**DATE:** April 27, 2012

**TO:** Iowa Medicaid Hospitals

**ISSUED BY:** Iowa Department of Human Services, Iowa Medicaid Enterprise (IME)

**RE:** Reporting Referral on Emergency Room (ER) Visits

**EFFECTIVE:** June 1, 2012

<u>Informational Letter 1025</u> described changes in member copayment and provider reimbursement for hospital ER visits where the claim indicates treatment of non-emergent medical condition(s). The letter indicated that providers are to use UB04 claim form locator 76 in conveying the referral (or lack of referral) per the IME published claim form instructions.

With the implementation of the HIPAA 5010, the electronic equivalent of form locator 76 must be used for the *attending* physician, and must be populated with an NPI. To account for this, the IME has adjusted the claim form instructions to **use form locator 79 (in all cases) to indicate the NPI of the referring provider (MediPASS or otherwise) when that referral has been obtained.** For claims submitted effective June 1, 2012, for dates of service on and after January 1, 2012, please follow this new instruction. The revised claim form instructions are posted on the IME website at:

http://www.ime.state.ia.us/docs/UB04\_BillingInstructions.pdf.

This new instruction allows for consistency between paper and electronic claims and is a more standardized use of the format. Providers should confirm the accuracy of reimbursement for any electronic ER claim submission sent in HIPAA version 5010. In any case where a referral was not obtained, but the provider was paid as though it was, an adjustment should be submitted to the IME.

If you have any questions, please contact the IME Provider Services Unit, 1-800-338-7909, locally 515-256-4609 or by email at <a href="mailto:imeproviderservices@dhs.state.ia.us">imeproviderservices@dhs.state.ia.us</a>.